Southside Survivor Response Center, Inc.



Employment Application

	Position (s) ap	oplied for:				
	Rate of pay ex	xpected:				
	Were you pre-	viously employed by u	s? If yes, when?			
	If your applica	ation is considered favo	orable, on what date w	vill you be able	to start?	
		PERSONAL IN	NFORMATION	<u>1</u>		
Name:			Date:			
Address:			Telephone:	:		
City:		State:			Zip:	
Are you legally eligible for emp	ployment in the	USA?				
LIST BELOW A	LL PRESENT	AND PAST EMPLO			E MOST RECENT:	
Name		Address	Phone Nu	ımber	Reason for Leaving	
May we contact the employers	listed above?					
If not, indicate which one (s) yo	ou do not wish u					
Did you graduate from High Sc	chool?		ATION If not, did you obtai	n at GED?		
Did you graduate with a four ye *A copy of your degree will be	ear degree from ear equired at hi	ire.	YesNo			
Full Name of Coll	ege	Name of Degr	ee	Major	Minor	
Describe any other training rela	ated to the position	on for which you have	applied:			
Please indicate why you are app	plying for this po	osition:				

Please Read and Sign Below

These facts set forth in my application for employment are true and complete. I understand if employed, any false statement on this application may result in my dismissal. I further understand that this is not and is not intended to be a contract of employment, nor does this application obligate the employer in any way if the employer decides to employ me.

Southside Survivor Response Center, Inc. (SSRC) is hereby authorized to make any investigation of my personal and financial history through any investigative or credit agencies or bureaus of SSRC's choice. I understand that SSRC has the right to verify information on this application. I authorize you to make an investigative consumer report whereby information is obtained through personal interviews with neighbors, friends, or others with who I am acquainted. This inquiry, if made, may include information as to my character, general reputation, personal characteristics and mode of living. I understand that I have the right to make a written request within a reasonable period of time to receive additional detailed information about the nature and scope of any such investigative report that is made. I agree to apply for a VA state-wide Criminal History Record. I agree to provide SSRC with a copy of this report the next working day after receipt. I understand SSRC intends to terminate any employee who provides false information on this application, resume, or during the interview process.

Signature of Applicant	

Applicant: The Civil Rights Act of 1964 prohibits discrimination in employment because of race, color, religion, sex or national origin. Federal law also prohibits discrimination on the basis of age in respect to certain individuals.

Please provide addresses and phone numbers for those persons that can comment on your job performance.

Name Professional References	Phone Number (required)	Relationship	

For positions requiring a four-year college degree,	the phone number of	the college from	which you gradu	ated:
Do you speak, read, or write any languages other t	han English?	Yes	No	

Applications not valid after this advertised position is filled.